

BEST AVAILABLE COPY

SECRET

PERSONALITY		FILE REQUEST		
TO RI/ANALYSIS SECTION		DATE <i>Dept. Army CX-200 051724Z Apr 57 13 Sept. 58</i>		
FROM		ROOM NO.	TELEPHONE	
<p>INSTRUCTIONS: Form must be typed or printed in block letters.</p> <p>SECTION I: List 301 number, name, and identifying data in the spaces provided. All known aliases and variants (including maiden name, if applicable) must be listed. If the identifying data varies with the alias used, a separate form must be used. Write UNKNOWN for items you are unable to complete.</p> <p>SECTION II: List cryptonym or pseudonym if assigned. If true name is sensitive, fill in the 301 number and Section II only. If true name is non-sensitive, both Sections I and II must be completed.</p> <p>SECTION III: To be completed in all cases.</p>				
SECTION I				
NAME (Last) <i>Wirsing</i>		(First) <i>Giselher</i>	(Middle) <i>(Dr.)</i>	
NAME VARIANT				
NAME 2. (Last)	(First)	(Middle)	(Title)	
PHOTO	4. BIRTH DATE	5. COUNTRY OF BIRTH	6. CITY OR TOWN OF BIRTH	7. OTHER IDENTIFICATION
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<i>GERM</i>		
OCCUPATION/POSITION <i>Edit. of Die Welt of Hamburg</i>				OCC/POS. CODE
CRYPTONYM OR PSEUDONYM				SENSITIVE NON-SENSITIVE
SECTION II				
COUNTRY OF RESIDENCE <i>NETT</i>	10. ACTION DEAK <i>NET 2-5</i>	11. 2ND CITY INTEREST <i>GERM</i>	12. 3RD CITY INTEREST	12A.
COMMENTS:				
SECTION III				
DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCES METHODS EXEMPTION 3B2B NAZI WAR CRIMES DISCLOSURE ACT DATE 2003 2006				

OPEN FILE	RESTRICTED FILE	SIGNATURE
<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
RM NO. 831 TEST NOV 55		

SECRET

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